

PART B—ISSUE FEE TRANSMITTAL

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. **See reverse for Certificate of Mailing.**

1. CORRESPONDENCE ADDRESS	2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)
TERRY L MILLER POMS SMITH LANDE AND ROSE 2029 CENTURY PARK EAST 38TH FLOOR LOS ANGELES CA 90067-3024 E6M1/0305	INVENTOR'S NAME
	Street Address
	City, State and ZIP Code
	CO-INVENTOR'S NAME
	Street Address
	City, State and ZIP Code
	<input type="checkbox"/> Check if additional changes are on reverse side

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/486,025	06/08/95	027	H0, T	2613 03/05/96
First Named Applicant				

TITLE OF INVENTION
ROBERTS, PETER C. T.
FOCAL PLANE ARRAY IMAGING DEVICE WITH RANDOM ACCESS ARCHITECTURE

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
2 111-266	348-301.000	044	UTILITY	NO	\$1250.00	06/05/96

3. Correspondence address change (Complete only if there is a change)	4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.
	1 POMS, SMITH, 2 LANDE & ROSE 3

DO NOT USE THIS SPACE

810 BL 05/15/96 08486005
1 142 1,250.00 CK
1 561 30.00 CK

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)		6a. The following fees are enclosed:	
(1) NAME OF ASSIGNEE:	LITTON SYSTEMS, INC.	<input checked="" type="checkbox"/> Issue Fee	<input checked="" type="checkbox"/> Advance Order - # of Copies 10
(2) ADDRESS: (CITY & STATE OR COUNTRY)	Woodland Hills, California	6b. The following fees should be charged to:	
		DEPOSIT ACCOUNT NUMBER 16-2230	
		(ENCLOSE PART C)	
		<input type="checkbox"/> Issue Fee <input type="checkbox"/> Advance Order - # of Copies	
		<input checked="" type="checkbox"/> Any Deficiencies In Enclosed Fees	
A. <input type="checkbox"/> This application is NOT assigned.		The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.	
X <input checked="" type="checkbox"/> Assignment previously submitted to the Patent and Trademark Office.		(Authorized Signature)	
<input type="checkbox"/> Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.		Terry J. Miller	
PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.		(Date) 4/18/96	
		NOTE: The Issue Fee will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.	

1. TRANSMIT THIS FORM WITH FEE-CERTIFICATE OF MAILING ON REVERSE